/0 663 57/ Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD Effectiv January 1, 2003										
CLAIMS AS FILED - PART I (Column 1) (Column 2)					MALL EN		OR.	OTHER SMALL E		
TOTAL CLAIMS	وور				RATE	FEE		RATE	FEE	
FOR	NUMBER FILED	NUMBER EXTRA			Basic Fee	376.00	OR	Basic Fee	750.00	
TOTAL CHARGEABLE CLAIMS	20, minus 20=				X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS	∫ minus 3 = 2			X42=	84	OR	X84=	•	Γ	
MULTIPLE DEPENDENT CLAIM PRESENT					+140=		OR	+280=		İ
* If the difference in column 1 is less than zero, enter *C* in column 2				1	TOTAL	459	OR	TOTAL	_	
CLAIMS AS AMENDED - PART II OTHER TO								1		
11-15 D5 (Octumn 1)	<u> </u>	SMALL	ENTITY	OR	SMALL] '			
CLAMS REMADING AFTER AMENDMENT	HIGH NUM PREVI PAID	BER F	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AFTER AMENDMENT Total • /	Minus - 8	0]	X\$ 9=		OR	X\$18=]
Independent •	Minus •••	51			X42=		OR	X84=		
FIRST PRESENTATION OF N	MULTIPLE DEPENDENT CLAIM			J	+140=		OR	+280=		1
1 9 11 13	14			ı	YOTAL ADDIT, FEE		OR	YOTAL ADDIT FEE		1
3/21/66 (Column 1) (Column 2) (Column 3)										
CLANS REMARKING AFTER ALIENDMENT Total Independent	NUA PRIEV	ARER IOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total . • 7	Minus ••	7 .	• /]	X\$ 9=		OR	X\$18=		ı
Independent •	Minus		•/	4	X42=		lor	X84=		1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					+140=		OR	+280=	·	1
. 4					YOTAL ADDIT, FEE		OR	ADDIT, FEE		1
9-806 (Catumn 1)	(Cet	ມກາກ 2) (1	Cotumn 3	n.						
CLAMS REMAINING AFTER AMERICANEM	NU PREV	MEST MBER MOUSLY D FOR	PRESENT EXTRA		RATE	ADOI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Total • /O	Minus	20	•)		X\$ 9=		OR	X\$18=		
Total • / () Independent • /	Minus •••	$\overline{}$	•	4	X42=		OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					+140=		OR	+280=		1
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. " If the "Nighest Number Previously Post For" IN THIS SPACE is less than 20, enter "20."					TOTAL		OR	TOTAL		7
"If the "Highest Number Previously Post For" IN THIS SPACE is less than 20, enter "20." ADDIT, FEE										
FORM PTO-618 (Flore 1202) 12	L Government Printing Officer 200		111		core and Trade	mark Office.	48.8	EMPTHENT C	FCOMMER	لے